

WATER WELL RECORD Form WWC-5

☐ Original Record ☐ Correction ☐ Change in Well Use

Division of Water
Resources App. No.

Well ID

1 LOCATION OF WATER WELL:

County: Butler

Fraction

SW 1/4 NW 1/4 NE 1/4

Section Number

16

Township Number

T 26 S

Range Number

R 14 E

2 WELL OWNER: Last Name: Terrell

First: Conley

Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: ☒

Business:

Address:

Address:

City:

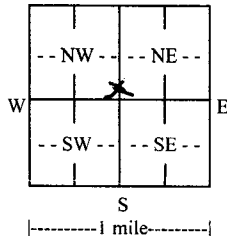
326 So 6th Towanda

State: Ka

ZIP: 69144

326 So 6th Towanda Ka 69144

3 LOCATE WELL WITH "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 9.0 ft.

Depth(s) Groundwater Encountered: 1) 9.0 ft.

2) 0 ft. 3) 0 ft. or 4) ☐ Dry Well

WELL'S STATIC WATER LEVEL: 30 ft.

☐ below land surface, measured on (mo-day-yr).....

☐ above land surface, measured on (mo-day-yr).....

Pump test data: Well water was 0 ft.

after..... hours pumping gpm

Well water was 0 ft.

after..... hours pumping gpm

Estimated Yield: 1.0 gpm

Bore Hole Diameter: in. to ft. and

..... in. to ft.

5 Latitude: (decimal degrees)

Longitude: (decimal degrees)

Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27

Source for Latitude/Longitude:

☐ GPS (unit make/model:)

(WAAS enabled? ☐ Yes ☐ No)

☐ Land Survey ☐ Topographic Map

☐ Online Mapper:

6 Elevation: ft. ☐ Ground Level ☐ TOC

Source: ☐ Land Survey ☐ GPS ☐ Topographic Map

☐ Other

7 WELL WATER TO BE USED AS:

1. Domestic:

- ☒ Household
☐ Lawn & Garden
☐ Livestock

2. ☐ Irrigation

3. ☐ Feedlot

4. ☐ Industrial

5. ☐ Public Water Supply: well ID

6. ☐ Dewatering: how many wells?

7. ☐ Aquifer Recharge: well ID

8. ☐ Monitoring: well ID

9. Environmental Remediation: well ID

☐ Air Sparge ☐ Soil Vapor Extraction

☐ Recovery ☐ Injection

10. ☐ Oil Field Water Supply: lease

11. Test Hole: well ID

☐ Cased ☐ Uncased ☐ Geotechnical

12. Geothermal: how many bores?

a) Closed Loop ☐ Horizontal ☐ Vertical

b) Open Loop ☐ Surface Discharge ☐ Inj. of Water

13. ☐ Other (specify):

Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☒ No

If yes, date sample was submitted:

Water well disinfected? ☒ Yes ☐ No

8 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other

Casing diameter 4 1/2 in. to ft. Diameter in. to ft. Diameter in. to ft.

Casing height above land surface 1.2 in. Weight lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

- ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☒ PVC
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)

☐ Other (Specify)

SCREEN OR PERFORATION OPENINGS ARE:

- ☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)

SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: ☒ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other

Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination:

- ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☒ Livestock Pens ☐ Insecticide Storage
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well
☐ Other (Specify)

Direction from well? Distance from well? ft.

10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS

0	90'	4 1/2" PVC	70'		Per gravel
	40'	Perforations	20'	4'	Bentonite
	60'	Solid P.V. 4 1/2"	4'	0'	Neat cement

Notes:

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☐ constructed, ☒ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-year) 23 June 20 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 734 This Water Well Record was completed on (mo-day-year) 19 July 20

under the business name of Pro-1/2 inch / 4 inch system Signature Chad J. [Signature]

Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section,

1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

KSA 82a-1212

Revised 7/10/2015